A Tingling Sensation

Category: Stories
written by Mitch Kaminski | March 23, 2018

Mitch Kaminski ~

It had been a hectic day in the urgent-care clinic of my large family practice, and I was starting to worry about the time: My last two patients had put me thirty minutes behind.

I felt relieved when I saw the note for the next patient: “Seventy-four-year-old female with UTI.”

A urinary-tract infection! This should be quick and uncomplicated….

I walked into the room to find a well-dressed older woman seated on the exam table. I had just enough time to wonder fleetingly, *Why do some patients decide to wait on the exam table while others stay seated in the chair nearby?* Then I turned my full attention to the woman before me.

Mrs. Sadie Jones looked dignified, her upright posture and modest hat fit for a Sunday church service.

After introductions, I asked, “How can I help you today?”

“I’ve been a mess this past week,” she replied softly. “My fingers are tingling, and when that happens, I know just what the problem is.”

Suddenly, she bent her head and murmured, “I just buried my husband.”

She paused, fighting to keep her composure. “You can do this, Sadie,” she whispered.

Caught off guard, I said quietly, “I’m very sorry for your loss.”

Although I wanted to ask more about her husband, my interest was also piqued by the quirky physical symptom she’d mentioned.

“What problem causes your fingers to tingle?” I asked.

“A urinary-tract infection.”

“Are you having any burning when you pee?”

“No.”

“Are you going to the bathroom more often?”

“Yes.”

“Well, I haven’t seen your urinalysis results,” I said. “We’ll do one here in

the office, but I'm not certain that it will show a UTI."

"I know," Sadie replied. "The other doctors tell me that it doesn't make any sense, but that's what it means for me."

After years of puzzling through patient complaints, I've learned to keep an open mind about how the body works.

Let's just see what the urinalysis shows, I thought.

From the start of the visit, I'd felt keenly and uncomfortably aware of Sadie's intense sadness, so evident in her downcast eyes and soft, measured speech.

Should I bring it up? I wondered. *Or would it make her feel worse? She seems to be trying so hard to stay calm….*

Seeing her sitting there so quietly, I thought: *What a waste it would be to spend our visit focusing on something that could be diagnosed over the phone. She's just buried her husband!*

My anxiety about my schedule evaporated.

"I'm sorry about your husband's death," I said. "When did he die? Why?"

"John died last Thursday."

Only four days ago.

"Was it expected, or a surprise?"

"John had muscular dystrophy," she said. "All of the doctors were surprised that he'd lived as strong and long as he had. So his death wasn't a surprise. But I'd taken care of him for a long time." With some pride, she added, "John and I were married for fifty-five years."

I did a quick calculation.

"You were nineteen when you got married?"

"Yes, that's right, but John was older. He was seventy-nine when he died, and at that point he weighed only one hundred and twenty pounds." Softly, she marveled, "He didn't need a wheelchair until the last ten years of his life."

"So you've been a caretaker," I said gently. "This must really leave an emptiness for you."

Sadie nodded.

"Do you have anyone around to support you?"

"We have three children, and I have two brothers. They've all been supportive. John was an only child, so he didn't have any brothers or sisters."

As her words flowed on, her posture softened, and she seemed relieved to be sharing these details.

I wish every patient had support like that! I thought, feeling relieved myself. Despite the heavy loss that Sadie had suffered, her words and general demeanor led me to believe that she'd be fine.

"Is there anything else that I can do for you?" I asked. Now I felt eager to review her records, order the appropriate tests and do something above and beyond what her initial complaint required.

She mentioned needing some routine blood work, and I gladly arranged it before our visit wound to a close.

It occurred to me that, in mentioning her husband's death at the start, Sadie had actually shared her most pressing concern with me.

And her urinalysis? The in-office test revealed that she did indeed have a UTI.

I left the room feeling touched and grateful that she'd trusted me with so much more than that.

About the author:

Mitch Kaminski is a family physician who has practiced, taught and led in primary care for thirty-five years. He currently serves as the chief clinical officer for the Delaware Valley ACO in the Philadelphia region and continues to see patients and teach part-time at the Thomas Jefferson University Department of Family and Community Medicine. "I hope to always remain mindful of the trust that patients, often when they are most vulnerable, bring to healthcare providers. Writing stories helps me to do that."

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